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FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

| FORM 3 | For An Aut | horized Com | mittee | | (| Office Use Only |
|---------------------------------|---|----------------------|-----------------------------------|----------------|-------------------|---------------------------------|
| NAME OF COMMITTEE (in full) | TYPE OR PRINT | | ample: If typing er the lines. | , type | 12FE4M5 | |
| Gloria Bromell Tinub | u for Congress | | | | | ı |
| | | | | | | |
| | | | | | | |
| ADDRESS (number and street) | PO Box 1022 | | | | | |
| Check if different | | | | | | |
| than previously reported. (ACC) | Conway | | | | SC 2 | 9528 |
| 2. FEC IDENTIFICATION | NUMBER ▼ | CITY ▲ | | \$ | STATE A | ZIP CODE ▲ |
| | | | | | | STATE ▼ DISTRICT |
| C C00508242 | | 3. IS THIS REPORT | × NEW (N) | OR | AMENDE (A) | SC 07 |
| 4. TYPE OF REPORT (| Chaosa Opo) | | | | | |
| (a) Quarterly Reports: | (k | o) 12-Day PRE | -Election Repor | t for the: | | |
| (a) Quarterly Hoports. | | | Primary (12P) | | General (12 | G) Runoff (12R) |
| April 15 Quarter | ly Report (Q1) | П | Convention (1 | 20) | Special (12 | 9) |
| July 15 Quarterly | y Report (Q2) | | Convention (1 | 20) | Special (12) | 3) |
| October 15 Qua | rterly Report (Q3) | Election on | M M / | D D / | Y | in the State of |
| January 31 Year | -End Report (YE) (d | c) 30-Day POS | T -Election Repo | ort for the: | | |
| | | | General (30G) | | Runoff (30F | Special (30S) |
| Termination Rep | ort (TER) | Election on | M M / | D D / | YYYY | in the State of |
| 5. Covering Period | 07 D D D / | Y Y Y Y Y 2016 | through | M M 09 | 30 | Y Y Y Y 2016 |
| I certify that I have examined | this Report and to the Fowler, Donald, | | nowledge and b | elief it is tr | ue, correct and | complete. |
| Type or Print Name of Treasu | urer | -, , | | | | |
| Signature of Treasurer | Fowler, Donald, L, , | | [Electronically F | iled] [| Date 10 | / D D / Y Y Y Y 11 2016 |
| NOTE: Submission of false, err | oneous, or incomplete | information may | subject the pers | on signing t | his Report to the | penalties of 52 U.S.C. §30109 |
| Office | | | | | | |
| Use Only | | | | | | FEC FORM 3 (Revised 05/2016) |

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Gloria Bromell Tinubu for Congress

2016 07 2016 09 30 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 125.00 2699.86 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 125.00 2699.86 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 125.00 11962.40 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 125.00 11962.40 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 66.53 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 374642.99 Schedule C and/or Schedule D).....

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 05/2016)
Write or Type Committee Name

PAGE 3 / 54

Gloria Bromell Tinubu for Congress

| C | oria | Bromeii | Hubu | tor | Congress |
|---|------|---------|------|-----|----------|
| | | | | | |

| I. RECEIPTS | | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date | | |
|-------------|--|-------------------------------|---------------------------------|--|--|
| 11. | CONTRIBUTIONS (other than loans) FROM: | | | | |
| | (a) Individuals/Persons Other Than | | | | |
| | Political Committees (i) Itemized (use Schedule A) | 0.00 | 1050.00 | | |
| | (ii) Unitemized | 0.00 | 524.86 | | |
| | (iii) TOTAL of contributions from individuals | 0.00 | 1574.86 | | |
| | (b) Political Party Committees | 0.00 | 0.00 | | |
| | (c) Other Political Committees (such as PACs) | 0.00 | 250.00 | | |
| | (d) The Candidate(e) TOTAL CONTRIBUTIONS | 125.00 | 875.00 | | |
| | (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)) | 125.00 | 2699.86 | | |
| | TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 | | |
| | LOANS: | | | | |
| | (a) Made or Guaranteed by the Candidate | 0.00 | 2301.33 | | |
| | (b) All Other Loans | 0.00 | 100.00 | | |
| | (c) TOTAL LOANS (add Lines 13(a) and (b)) | 0.00 | 2401.33 | | |
| | OFFSETS TO OPERATING | | | | |
| | EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 0.00 | | |
| | OTHER RECEIPTS (Dividends, Interest, etc.) | 0.00 | 0.00 | | |
| | TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) | 125.00 | 5101.19 | | |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 54

| | II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|-----|--|-------------------------------|------------------------------------|
| 17. | OPERATING EXPENDITURES | 125.00 | 11962.40 |
| 18. | TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19 | LOAN REPAYMENTS: | | |
| | (a) Of Loans Made or Guaranteed by the Candidate | 0.00 | 0.00 |
| | (b) Of All Other Loans | 0.00 | 100.00 |
| | (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)) | 0.00 | 100.00 |
| 20. | REFUNDS OF CONTRIBUTIONS TO: | | |
| | (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| | | 0.00 | 0.00 |
| | (c) Other Political Committees | 0.00 | 0.00 |
| | (such as PACs) | | , , , , , , |
| | (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)) | 0.00 | 0.00 |
| 21. | OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 22. | TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) | 125.00 | 12062.40 |
| | III. CASH SU | JMMARY | |
| 23. | CASH ON HAND AT BEGINNING OF REPO | RTING PERIOD | 66.53 |
| 24 | TOTAL RECEIPTS THIS PERIOD (from Line | 16, page 3) | 125.00 |
| 25. | SUBTOTAL (add Line 23 and Line 24) | | 191.53 |
| 26. | TOTAL DISBURSEMENTS THIS PERIOD (fro | om Line 22) | 125.00 |
| 27. | CASH ON HAND AT CLOSE OF REPORTING | G PERIOD | 66.53 |

SCHEDULE A (FEC Form 3)

PAGE 5 OF FOR LINE NUMBER: 54 Use separate schedule(s) (check only one) for each category of the 11a **x** 11d 11b 11c **Detailed Summary Page** 12 13a 13b

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress Full Name (Last, First, Middle Initial) Tinubu, Gloria, Bromell, Date of Receipt Mailing Address 8 Laurel St 13 City State Zip Code Transaction ID: VNW1EEG0MX4 SC 29526-5154 Conway FEC ID number of contributing Amount of Each Receipt this Period H2SC07108 federal political committee. 125.00 Name of Employer Occupation self employed **Economist** Memo Item Receipt For: 2014 Election Cycle-to-Date Primary 🗶 General 875.00 Other (specify) * In-Kind: NGP software Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 125.00 SUBTOTAL of Receipts This Page (optional)..... 125.00 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3)

PAGE 6 54 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **x** 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress Full Name (Last, First, Middle Initial) Date of Disbursement Tinubu, Gloria, Bromell, , 2016 Mailing Address 8 Laurel St City State Zip Code **FEC Identification Number** SC Conway 29526-5154 Purpose of Disbursement NGP software H2SC07108 Candidate Name Amount of Each Disbursement this Period Category/ Tinubu, Gloria, Bromell, , Type Office Sought: Disbursement For: 2014 125.00 House Senate Primary ✗ General Transaction ID: VNW1EEG0MX4I Other (specify) President * In-Kind Received Memo Item SC State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 125.00 TOTAL This Period (last page this line number only)..... 125.00

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 7
FOR LINE NUMBER: (check only one)

13a 13b

| | | Detailed 6d | initially 1 ago | 13b | | | |
|--|--------------------|----------------------------|--|--------|--|--|--|
| AME OF COMMITTEE (In Full) | _ | | Transaction ID: VNW1ECAQFA9L | | | | |
| Gloria Bromell Tinubu for Congres | | | | | | | |
| LOAN SOURCE Full Name (Last, First, Mic Tinubu, Gloria, Bromell, , | ddle Initial) | N | Memo Item Election: 2012 Primary General | | | | |
| Mailing Address 8 Laurel St | | | Other (specify) | | | | |
| City | State | ZIP Code | | | | | |
| Conway | SC | 29526-5154 | Personal Funds of the Cand | lidate | | | |
| Original Amount of Loan | Cumulative Pay | ment To Date | Balance Outstanding at Close of This I | Period | | | |
| 5000.00 | 2 | 2000.00 | 3000.00 | | | | |
| TERMS Date Incurred | D | | nterest Rate Secured: f none, enter 0) | | | | |
| M12M / D30D / Y Z01Ť Y | M M / D D | / Y ňone Y | none % (apr) Yes | No | | | |
| List All Endorsers or Guarantors (if any) t | o Loan Source | | | | | | |
| 1. Full Name (Last, First, Middle Initial) | | Name of Emplo | oyer | | | | |
| Mailing Address | | Occupation | | | | | |
| | | Amount | | | | | |
| City State | ZIP Code | Guaranteed Outstanding: | | | | | |
| 2. Full Name (Last, First, Middle Initial) | ' | Name of Emplo | oyer | | | | |
| Mailing Address | | Occupation | | | | | |
| | | Amount Guaranteed | | | | | |
| City State | ZIP Code | Outstanding: | 9 9 9 | | | | |
| 3. Full Name (Last, First, Middle Initial) | | Name of Emplo | Name of Employer | | | | |
| Mailing Address | | Occupation | | | | | |
| | | Amount Guaranteed | | | | | |
| City State | ZIP Code | Outstanding: | y | | | | |
| 4. Full Name (Last, First, Middle Initial) | | Name of Emplo | oyer | | | | |
| Mailing Address | | Occupation | | | | | |
| | | Amount | | | | | |
| City | ZIP Code | Guaranteed Outstanding: | , | | | | |
| SUBTOTALS This Period This Page (optional). | | | 2000.00 | \neg | | | |
| | | | 3000.00 | 4 | | | |
| FOTALS This Period (last page in this line only | /) | | > | | | | |
| Carry outstanding balance only to LINE 3. Sch | nedule D. for this | line. If no Schedule D. | carry forward to appropriate line of Summ | ary. | | | |

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE OF FOR LINE NUMBER: **X** 13a (check only one)

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13b Transaction ID: VNW1ECAQFR9L NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) none D01D M 02M Ž01Ž ňoně x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 9
FOR LINE NUMBER: (check only one)

13a

OF

| | | 100 |
|---|--------------------|---|
| NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre | SS | Transaction ID : VNW1ECAQFH4L |
| LOAN SOURCE Full Name (Last, First, N | Middle Initial) | Memo Item Election: 2012 |
| Tinubu, Gloria, Bromell, , | madic initialy | Memo Item Clection: 2012 |
| Mailing Address 8 Laurel St | | Other (specify) |
| City | State | ZIP Code Responsibility Personal Funds of the Candidate |
| Conway | SC | 29526-5154 Tersonal Funds of the Candidate |
| Original Amount of Loan | Cumulative Pa | yment To Date Balance Outstanding at Close of This Period |
| 10000.00 | | 0.00 |
| TERMS Date Incurred | Γ | Date Due Interest Rate Secured: (If none, enter 0) |
| M02 ^M / D14 ^D / Y Ž01Ž Y | M M / D D | / Y ňoně Y none % (apr) Yes X No |
| List All Endorsers or Guarantors (if any) | to Loan Source | |
| 1. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | 1 | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount Guaranteed |
| City | ZIP Code | Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | <u> </u> | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
| SUBTOTALS This Period This Page (optiona | | |
| CODICINES TIME FORMATION TAYS (OPTIONAL | y | 10000.00 |
| TOTALS This Period (last page in this line of | nly) | ······································ |
| Carry outstanding balance only to LINE 3, S | chedule D, for thi | s line. If no Schedule D, carry forward to appropriate line of Summary. |

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 10

13a

OF

| | | 100 |
|--|---------------------|--|
| NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre | SS | Transaction ID : VNW1ECAQFE0L |
| LOAN SOURCE Full Name (Last, First, N | Middle Initial) | Memo Item Election: 2012 |
| Tinubu, Gloria, Bromell, , | madic initialy | Memo Item Clection: 2012 |
| Mailing Address 8 Laurel St | | Other (specify) ——————————————————————————————————— |
| City | State | ZIP Code Responsible to the Candidate Responsible to the Ca |
| Conway | SC | 29526-5154 |
| Original Amount of Loan | Cumulative Pa | yment To Date Balance Outstanding at Close of This Period |
| 13000.00 | | 0.00 13000.00 |
| TERMS Date Incurred | Γ | Date Due Interest Rate Secured: (If none, enter 0) |
| M03 ^M / D05 ^D / Y Ž01Ž Y | M M / D D | none % (apr) Yes X No |
| List All Endorsers or Guarantors (if any | to Loan Source | |
| 1. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | - | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount Guaranteed |
| City | ZIP Code | Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | <u>'</u> | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City State | ZIP Code | Guaranteed Outstanding: |
| SUBTOTALS This Period This Page (optiona | N | |
| COSTOTALO TINO I ENOU TINO Page (optiona | ·y | 13000.00 |
| TOTALS This Period (last page in this line of | nly) | ······································ |
| Carry outstanding balance only to LINE 3, S | Schedule D, for thi | s line. If no Schedule D, carry forward to appropriate line of Summary. |

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 11 FOR LINE NUMBER: **X** 13a (check only one)

| | | | Detailed Guillinary | i age | | 13b | | |
|---|--|---------------|--------------------------|------------------|---|------------|--|--|
| NAME OF COMMITTEE (In Full) | | | Trar | saction II | D: VNW1ECAQFB6L | | | |
| Gloria Bromell Tinubu for Congress | 3 | | | | | | | |
| LOAN SOURCE Full Name (Last, First, Mic | ddle Initial) | | ☐ Memo It | em Elec | tion: 2012 | | | |
| Tinubu, Gloria, Bromell, , | | | | | Primary | | | |
| | | | _ | General | | | | |
| Mailing Address 8 Laurel St | | | | | Other (specify) ▼ | | | |
| City | State | ZIP Code |) | x | Personal Funds of the 0 | Candidate | | |
| Conway | SC | 29526-5 | 154 | | T CISORAL T UNUS OF THE V | Januluate | | |
| Original Amount of Loan | Cumulative Pay | ment To D | ate | Balance O | outstanding at Close of T | his Period | | |
| 10000.00 | | | 0.00 | | 10000 | 0.00 | | |
| 7 7 7 | 7 | 7 | 4 | | 1 | | | |
| TERMS Date Incurred | D | ate Due | Interest (If none, o | | Secureo | i: | | |
| M03M / P14P / Y Ž01Ž Y | M M / D D | / Y Y | non ^Y Y | none | % (apr) Yes | x No | | |
| List All Endorsers or Guarantors (if any) to | o Loan Source | | | | | | | |
| 1. Full Name (Last, First, Middle Initial) | | Ī | Name of Employer | | | | | |
| Mailing Address | | (| Occupation | | | | | |
| | | | | | | | | |
| O't. | 7ID 0- 4- | | Amount Guaranteed | | | 7 | | |
| City | ZIP Code | I | Outstanding: | 7 | 7 | _ | | |
| 2. Full Name (Last, First, Middle Initial) | 2. Full Name (Last, First, Middle Initial) | | | Name of Employer | | | | |
| Mailing Address | | (| Occupation | | | | | |
| | | | Amount | | | | | |
| City | ZIP Code | I | Guaranteed Outstanding: | 7 | | | | |
| 3. Full Name (Last, First, Middle Initial) | <u>'</u> | 1 | Name of Employer | | | | | |
| Mailing Address | | (| Occupation | | | | | |
| | | | Amount | | | | | |
| City State | ZIP Code | | Guaranteed | | | | | |
| | | | Outstanding: | , | , | | | |
| 4. Full Name (Last, First, Middle Initial) | | 1 | Name of Employer | | | | | |
| Mailing Address | | (| Occupation | | | | | |
| | | | Amount | | | _ | | |
| City State | ZIP Code | | Guaranteed | | | | | |
| | | (| Outstanding: | , | | | | |
| | | | | | | | | |
| SUBTOTALS This Period This Page (optional) | | | ····· | | 10000 | 0.00 | | |
| TOTAL C This Desired () | Δ | | <u> </u> | | , , , , , | | | |
| TOTALS This Period (last page in this line only | /) | | ······ | | 7 | × | | |
| Carry outstanding balance only to LINE 3, Sch | nedule D. for this | s line. If no | Schedule D. carry | forward to | o appropriate line of Su | ummarv. | | |

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 12

13a

OF

| | | 100 |
|---|--------------------|--|
| NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre | SS | Transaction ID : VNW1ECAQFN5L |
| LOAN SOURCE Full Name (Last, First, N | liddlo Initial) | Election: 0040 |
| Tinubu, Gloria, Bromell, , | nddie Iriitiai) | ☐ Memo Item |
| Mailing Address 8 Laurel St | | General Other (specify) ▼ |
| City | State | ZIP Code Responsible to the Candidate Personal Funds of the Candidate |
| Conway | SC | 29526-5154 Personal Funds of the Candidate |
| Original Amount of Loan | Cumulative Pa | yment To Date Balance Outstanding at Close of This Period |
| 10000.00 | ļ, | 0.00 |
| TERMS Date Incurred | Γ | Date Due Interest Rate Secured: (If none, enter 0) |
| M03M / D14D / Y Ž01Ž Y | M M / D D | / Y ňoně Y none % (apr) Yes X No |
| List All Endorsers or Guarantors (if any) | to Loan Source | |
| 1. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount Guaranteed |
| City | ZIP Code | Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | 1 | Name of Employer |
| Mailing Address | | Occupation |
| 0.1 | 710.0.1 | Amount Guaranteed |
| City State | ZIP Code | Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount Guaranteed |
| City State | ZIP Code | Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | • | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City State | ZIP Code | Guaranteed Outstanding: |
| | · | |
| SUBTOTALS This Period This Page (optional |) | 10000.00 |
| TOTALS This Period (last page in this line or | nly) | ······ |
| Carry outstanding balance only to LINE 3, S | chedule D, for thi | s line. If no Schedule D, carry forward to appropriate line of Summary. |

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 13 OF
FOR LINE NUMBER:
(check only one)

ER: **x** 13a 13b

| AME OF COMMITTEE (In Bloria Bromell Tinut | ou for Congress | | | saction ID : VNW1ECAQFC4L |
|--|------------------------|------------------|-----------------------------|---|
| Tinubu, Gloria, Br | • | Idle Initial) | ☐ Memo Ite | em Election: 2012 x Primary General |
| Mailing Address 8 Laurel St | | | Other (specify) | |
| City | | State | ZIP Code | V Personal Funds of the Condidate |
| Conway | | SC | 29526-5154 | Personal Funds of the Candidate |
| Original Amount of Loa | n | Cumulative Pa | ment To Date | Balance Outstanding at Close of This Period |
| | 51000.00 | | 0.00 | 51000.00 |
| TERMS Date Inco | urred | Г | ate Due Interest F | |
| M03M / D30D / | Y Ž01Ž Y | M M / D D | / Y ňoně Y | none % (apr) Yes X No |
| List All Endorsers or G | Guarantors (if any) to | o Loan Source | | |
| 1. Full Name (Last, First | st, Middle Initial) | | Name of Employer | |
| Mailing Address | | | Occupation | |
| | la | | Amount Guaranteed | |
| City | State | ZIP Code | Outstanding: | 9 9 9 9 |
| 2. Full Name (Last, First | t, Middle Initial) | | Name of Employer | |
| Mailing Address | | | Occupation | |
| | 1 | T | Amount Guaranteed | |
| City | State | ZIP Code | Outstanding: | 9 9 |
| 3. Full Name (Last, First | t, Middle Initial) | • | Name of Employer | |
| Mailing Address | | | Occupation | |
| | 1 | | Amount | |
| City | State | ZIP Code | Guaranteed Outstanding: | 9 9 |
| 4. Full Name (Last, First | t, Middle Initial) | ! | Name of Employer | |
| Mailing Address | | | Occupation | |
| | | | Amount | |
| City | State | ZIP Code | Guaranteed Outstanding: | 9 9 |
| IDTOTAL O This Desired T | | | | |
| JOIOIALS IIIIS PERIOD I | ms rage (optional) | | <u> </u> | 51000.00 |
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

| NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congres | SS | | Tra | ansaction ID : VNW1ECAQFJ2L | | |
|---|---------------------|---------------|-----------------------------------|---|--|--|
| LOAN SOURCE Full Name (Last, First, M Tinubu, Gloria, Bromell, , | liddle Initial) | | ☐ Memo | x Primary | | |
| Mailing Address 8 Laurel St | | | | General Other (specify) ▼ | | |
| City | State | ZIP Code | | M December 5 and a fill a Continue | | |
| Conway | SC | 29526-51 | 54 | Personal Funds of the Candidate | | |
| Original Amount of Loan | Cumulative Page | yment To Da | te | Balance Outstanding at Close of This Period | | |
| 25000.00 | | | 0.00 | 25000.00 | | |
| TERMS Date Incurred | С | Date Due | Interes (If none | t Rate Secured: | | |
| M05 ^M / D14 ^D / Y Ž01Ž Y | M M / D D | / Y ňc | ne Y | none % (apr) Yes X No | | |
| List All Endorsers or Guarantors (if any) | to Loan Source | _ | | | | |
| 1. Full Name (Last, First, Middle Initial) | | N | ame of Employer | | | |
| Mailing Address | | 0 | Occupation | | | |
| | | | mount | | | |
| City | ZIP Code | | uaranteed utstanding: | 9 9 9 9 9 | | |
| 2. Full Name (Last, First, Middle Initial) | | N | Name of Employer | | | |
| Mailing Address | | 0 | ccupation | | | |
| | | | mount uaranteed | | | |
| City State | ZIP Code | | utstanding: | 9 1 9 1 9 | | |
| 3. Full Name (Last, First, Middle Initial) | | N | Name of Employer | | | |
| Mailing Address | | 0 | ccupation | | | |
| City State | ZIP Code | | mount uaranteed | | | |
| 4. Full Name (Last, First, Middle Initial) | | | utstanding: ame of Employer | , | | |
| Mailing Address | | | ccupation | | | |
| Mailing Address | | | | | | |
| City | ZIP Code | G | mount uaranteed utstanding: | 7 | | |
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

| | | 100 |
|--|---------------------|---|
| NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre | ess | Transaction ID : VNW1ECAQFQ1L |
| LOAN SOURCE Full Name (Last, First, I | Middle Initial) | Memo Item Election: 2012 |
| Tinubu, Gloria, Bromell, , | viidale iliitial) | Memo Item Clection: 2012 |
| Mailing Address 8 Laurel St | | Other (specify) |
| City | State | ZIP Code Responsibility Personal Funds of the Candidate |
| Conway | SC | 29526-5154 Tersonal Funds of the Candidate |
| Original Amount of Loan | Cumulative Pa | yment To Date Balance Outstanding at Close of This Period |
| 5000.00 | | 0.00 5000.00 |
| TERMS Date Incurred | [| Date Due Interest Rate Secured: (If none, enter 0) |
| M05 ^M / D21 ^D / Y Ž01Ž Y | M M / D D | none % (apr) Yes No |
| List All Endorsers or Guarantors (if any |) to Loan Source | |
| 1. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | ' | Name of Employer |
| Mailing Address | | Occupation |
| 911 | | Amount Guaranteed |
| City | ZIP Code | Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount Guaranteed |
| City | ZIP Code | Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
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| CODICIALS THIS FEHOU THIS FAGE (OPHORE | | 5000.00 |
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| Carry outstanding balance only to LINE 3, | Schedule D, for thi | s line. If no Schedule D, carry forward to appropriate line of Summary. |

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER:
(check only one)

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| AME OF COMMITTEE (In F Bloria Bromell Tinub | u for Congress | | | |
|--|--------------------------------------|------------------|---------------------------------|--|
| Tinubu, Gloria, Bro | m Election: 2012 X Primary General | | | |
| Mailing Address 8 Laurel St | | | | Other (specify) ▼ |
| City | | State | ZIP Code | V Developed Funds of the Condidate |
| Conway | | SC | 29526-5154 | Y Personal Funds of the Candidate |
| Original Amount of Loar | 1 | Cumulative Pa | ment To Date B | alance Outstanding at Close of This Period |
| , | 25000.00 | | 0.00 | 25000.00 |
| TERMS Date Incu | rred | Г | ate Due Interest R | |
| M ₀₅ M / D ₃₀ D / | ^Y Ž01Ž ^Y | M M / D D | | none % (apr) Yes X No |
| List All Endorsers or G | uarantors (if any) to | o Loan Source | | |
| 1. Full Name (Last, Firs | t, Middle Initial) | | Name of Employer | |
| Mailing Address | | | Occupation | |
| 2 | Ta | | Amount Guaranteed | |
| City | State | ZIP Code | Outstanding: | 7 |
| 2. Full Name (Last, First, | , Middle Initial) | · | Name of Employer | |
| Mailing Address | | | Occupation | |
| | la | T=15 0 . | Amount Guaranteed | |
| City | State | ZIP Code | Outstanding: | 7 |
| 3. Full Name (Last, First, | , Middle Initial) | | Name of Employer | |
| Mailing Address | | | Occupation | |
| | T | | Amount | |
| City | State | ZIP Code | Guaranteed Outstanding: | y y |
| 4. Full Name (Last, First, | , Middle Initial) | ! | Name of Employer | |
| Mailing Address | | | Occupation | |
| | | | Amount | |
| City | State | ZIP Code | Guaranteed Outstanding: | 7 |
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

| Bloria Bromell Tinu | | | | L | | |
|--------------------------------|---|------------------|---------------------------------|---|--|--|
| Tinubu, Gloria, B | tem Election: 2012 X Primary General | | | | | |
| Mailing Address 8 Laurel St | | | | Other (specify) ▼ | | |
| City | | State | ZIP Code | Personal Funds of the Candidate | | |
| Conway | | SC | 29526-5154 | 1 Craonal 1 unus of the Candidate | | |
| Original Amount of Lo | pan | Cumulative Pa | yment To Date | Balance Outstanding at Close of This Period | | |
| | 30000.00 | | 0.00 | 30000.00 | | |
| TERMS Date In | curred | С | Date Due Interest | | | |
| M06M / D04D | ž01ž ^Y | M M / D D | / Y ňoně Y | none % (apr) Yes X No | | |
| List All Endorsers or | Guarantors (if any) to | o Loan Source | | | | |
| 1. Full Name (Last, Fi | irst, Middle Initial) | | Name of Employer | | | |
| Mailing Address | | | Occupation | | | |
| City | State | ZIP Code | Amount Guaranteed Outstanding: | 7 | | |
| 2. Full Name (Last, Fir | st, Middle Initial) | | Name of Employer | Name of Employer | | |
| Mailing Address | | | Occupation | | | |
| | | 1 | Amount Guaranteed | | | |
| City | State | ZIP Code | Outstanding: | 9 9 | | |
| 3. Full Name (Last, Fir | st, Middle Initial) | • | Name of Employer | | | |
| Mailing Address | | | Occupation | | | |
| O:+ . | 04-4- | 710 0 | Amount Guaranteed | | | |
| City | State | ZIP Code | Outstanding: | 9 9 | | |
| 4. Full Name (Last, Fire | st, Middle Initial) | | Name of Employer | | | |
| Mailing Address | | | Occupation | | | |
| C:h | Ctata | ZID Code | Amount Guaranteed | | | |
| City | State | ZIP Code | Outstanding: | 9 9 | | |
| | Ti: D (:: 1) | | | | | |
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

| Gloria Bromell Ting LOAN SOURCE Full Tinubu, Gloria, E | Name (Last, First, Mic | | ☐ Memo Item Election: 2012 ✓ Primary | _ |
|--|---------------------------|--------------------|---|--------|
| Mailing Address 8 Laurel St | General Other (specify) ▼ | | | |
| City | | State | ZIP Code Section 2015 Funds of the Candidate Personal Funds of the Candidate | _ |
| Conway | | SC | 29526-5154 Personal Funds of the Candidate | ; — |
| Original Amount of L | oan | Cumulative Page | ment To Date Balance Outstanding at Close of This Perio | d |
| | 30000.00 | 9 | 0.00 30000.00 | |
| TERMS Date In | ncurred | С | ate Due Interest Rate Secured: (If none, enter 0) | _ |
| M06 ^M / D07 ^D | / <u>Y Z012</u> Y | M M / D D | / No due date none (a none Yes X No |) |
| List All Endorsers or | Guarantors (if any) to | o Loan Source | | |
| 1. Full Name (Last, F | First, Middle Initial) | | Name of Employer | |
| Mailing Address | | | Occupation | _ |
| City | State | ZIP Code | Amount Guaranteed Outstanding: | |
| 2. Full Name (Last, Fi | rst, Middle Initial) | | Name of Employer | _ |
| Mailing Address | | | Occupation | |
| | | | Amount Guaranteed | _ |
| City | State | ZIP Code | Outstanding: | |
| 3. Full Name (Last, Fi | rst, Middle Initial) | | Name of Employer | |
| Mailing Address | | | Occupation | |
| | 12 | T | Amount Guaranteed | |
| City | State | ZIP Code | Outstanding: | |
| 4. Full Name (Last, Fi | rst, Middle Initial) | | Name of Employer | |
| Mailing Address | | | Occupation | |
| | la | | Amount Guaranteed | |
| City | State | ZIP Code | Outstanding: | |
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

| | | 100 |
|--|-----------------------------|--|
| NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre | ess | Transaction ID : VNW1ECAQFS7L |
| LOAN SOURCE Full Name (Last, First, | Middle Initial) | Memo Item Election: 2012 |
| Tinubu, Gloria, Bromell, , | Memo Item Clection: 2012 | |
| Mailing Address 8 Laurel St | | Other (specify) |
| City | State | ZIP Code Responsible to the Candidate Personal Funds of the Candidate |
| Conway | SC | 29526-5154 |
| Original Amount of Loan | Cumulative Pa | yment To Date Balance Outstanding at Close of This Period |
| 26000.00 | | 0.00 26000.00 |
| TERMS Date Incurred | [| Date Due Interest Rate Secured: (If none, enter 0) |
| M06M / D11D / Y Ž01Ž Y | M M / D D | / Yno due date O.00 (apr) Yes No |
| List All Endorsers or Guarantors (if any |) to Loan Source | |
| 1. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
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| Carry outstanding balance only to LINE 3, | Schedule D, for thi | s line. If no Schedule D, carry forward to appropriate line of Summary. |

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

| IAME OF COMMITTEE (In Gloria Bromell Tinu | • | 3 | irans | action ID : VNW1ECAQFK0L | | |
|--|--------------------------------|------------------|-----------------------------------|--|--|--|
| Tinubu, Gloria, Bı | Election: 2012 Primary General | | | | | |
| Mailing Address 8 Laurel St | | | | X Other (specify) ▼ Runoff | | |
| City | | State | ZIP Code | V Davestal Funds of the Condidate | | |
| Conway | | SC | 29526-5154 | Personal Funds of the Candidate | | |
| Original Amount of Loa | an | Cumulative Page | yment To Date Ba | alance Outstanding at Close of This Period | | |
| | 7000.00 | 2 | 6700.00 | 300.00 | | |
| TERMS Date Inc | curred | С | rate Due Interest Ra | | | |
| M06 ^M / D26 ^D / | ^Y Ž01Ž ^Y | M M / D D | | none % (apr) Yes No | | |
| List All Endorsers or 0 | Guarantors (if any) to | o Loan Source | | | | |
| 1. Full Name (Last, Fir | rst, Middle Initial) | | Name of Employer | | | |
| Mailing Address | | | Occupation | Occupation | | |
| City | Ctoto | ZID Code | Amount Guaranteed | | | |
| City | State | ZIP Code | Outstanding: | 9 9 | | |
| 2. Full Name (Last, Firs | st, Middle Initial) | | Name of Employer | | | |
| Mailing Address | | | Occupation | | | |
| City | State | 7ID Codo | Amount Guaranteed | | | |
| City | State | ZIP Code | Outstanding: | 9 9 | | |
| 3. Full Name (Last, Firs | st, Middle Initial) | | Name of Employer | | | |
| Mailing Address | | | Occupation | | | |
| 011 | la | · | Amount Guaranteed | | | |
| City | State | ZIP Code | Outstanding: | 7 | | |
| 4. Full Name (Last, Firs | et, Middle Initial) | | Name of Employer | | | |
| Mailing Address | | | Occupation | | | |
| | T | 1 | Amount | | | |
| City | State | ZIP Code | Guaranteed Outstanding: | 9 | | |
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| SUBTUTALS This Period | inis Page (optional) | | <u> </u> | 300.00 | | |
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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|---|-----|
| | 13b |

| NAME OF COMMITTEE (In Full) | 00 | | Trans | saction ID : VNW1ECAQFW1L | | |
|--|---------------------|-------------------|--------------------------------|---|--|--|
| Gloria Bromell Tinubu for Congre | | | ☐ Memo Ite | | | |
| Tinubu, Gloria, Bromell, , Mailing Address 8 Laurel St | | | | Primary General ✗ Other (specify) ▼ Runoff | | |
| City | State | ZIP Code | | ▼ Personal Funds of the Candidate | | |
| Conway | SC | 29526-5154 | | | | |
| Original Amount of Loan 2500.00 | Cumulative Pay | | B 2000.00 | alance Outstanding at Close of This Period 500.00 | | |
| TERMS Date Incurred | | Date Due | Interest R | | | |
| ^M 06 ^M / ^D 30 ^D / Y Ž01Ž Y | M M / D D | / Y ňoně | (If none, er | none % (apr) Yes X No | | |
| List All Endorsers or Guarantors (if any) | to Loan Source | | | , (upi) | | |
| 1. Full Name (Last, First, Middle Initial) | | Name | e of Employer | | | |
| Mailing Address | | Occu | Occupation | | | |
| City | ZIP Code | Guara | Amount Guaranteed Outstanding: | | | |
| 2. Full Name (Last, First, Middle Initial) | | | of Employer | | | |
| Mailing Address | | Occu | pation | | | |
| City State | City State ZIP Code | | | Amount Guaranteed Outstanding: | | |
| 3. Full Name (Last, First, Middle Initial) | | Name | e of Employer | | | |
| Mailing Address | | Occu | pation | | | |
| City | ZIP Code | | anteed anding: | . , , | | |
| 4. Full Name (Last, First, Middle Initial) | I | Name | e of Employer | | | |
| Mailing Address | | Occu | pation | | | |
| City | ZIP Code | | anteed anding: | , , , , , , , , , | | |
| SUBTOTALS This Period This Page (optiona | l) | | | 500.00 | | |
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| Carry outstanding balance only to LINE 3, S | chedule D, for this | s line. If no Sch | edule D, carry fo | prward to appropriate line of Summary. | | |

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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X 13a 13b

OF

| AME OF COMMITTEE (In Bloria Bromell Tinu | ubu for Congress | | Transaction ID : VNW1ECAQFX9L |
|---|------------------------|-------------------|---|
| Tinubu, Gloria, B | • | Idle Initial) | Memo Item Election: 2012 Primary General |
| Mailing Address 8 Laurel St | | | ✓ Other (specify) ▼ Runoff |
| City | | State | ZIP Code |
| Conway | | SC | 29526-5154 Personal Funds of the Candidate |
| Original Amount of Lo | oan | Cumulative Pa | ment To Date Balance Outstanding at Close of This Period |
| , | 3500.00 | | 2500.00 1000.00 |
| TERMS Date Inc | curred | Г | ate Due Interest Rate Secured: (If none, enter 0) |
| M07M / D10D | ž01ž ^Y | M M / D D | / no due date none % (apr) Yes X No |
| List All Endorsers or | Guarantors (if any) to | o Loan Source | |
| 1. Full Name (Last, Fi | irst, Middle Initial) | | Name of Employer |
| Mailing Address | | | Occupation |
| 0.1 | 101.1 | 710 0 1 | Amount Guaranteed |
| City | State | ZIP Code | Outstanding: |
| 2. Full Name (Last, Fire | rst, Middle Initial) | | Name of Employer |
| Mailing Address | | | Occupation |
| | lo | 710.0.1 | Amount Guaranteed |
| City | State | ZIP Code | Outstanding: |
| 3. Full Name (Last, Fire | st, Middle Initial) | | Name of Employer |
| Mailing Address | | | Occupation |
| | | | Amount Guaranteed |
| City | State | ZIP Code | Outstanding: |
| 4. Full Name (Last, Fire | st, Middle Initial) | ' | Name of Employer |
| Mailing Address | | | Occupation |
| | | | Amount |
| City | State | ZIP Code | Guaranteed Outstanding: |
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| arry outstanding halanc | se only to LINE 3 Sch | edule D. for this | line. If no Schedule D, carry forward to appropriate line of Summary. |

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 23 OF FOR LINE NUMBER: **X** 13a (check only one)

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13b Transaction ID: VNW1ECAQFV3L NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 10000.00 1300.00 8700.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) none D06D ^M80^M Ž01Ž ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 8700.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 24 OF
FOR LINE NUMBER:
(check only one)

X 13a

| | | 100 | | | | |
|---|--------------------------------|---|--|--|--|--|
| NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre | SS | Transaction ID : VNW1ECAQFZ4L | | | | |
| LOAN SOURCE Full Name (Last, First, N | Aiddle Initial) | Election: 0040 | | | | |
| Tinubu, Gloria, Bromell, , | ☐ Memo Item | | | | | |
| Mailing Address 8 Laurel St | Mailing Address 8 Laurel St | | | | | |
| City | State | ZIP Code Personal Funds of the Candidate | | | | |
| Conway | SC | 29526-5154 Tersonal Funds of the Candidate | | | | |
| Original Amount of Loan | Cumulative Pa | yment To Date Balance Outstanding at Close of This Period | | | | |
| 5000.00 | 9 | 0.00 5000.00 | | | | |
| TERMS Date Incurred | [| Date Due Interest Rate Secured: (If none, enter 0) | | | | |
| M 08 ^M / D17 ^D / Y Ž01Ž Y | M M / D D | none % (apr) Yes X No | | | | |
| List All Endorsers or Guarantors (if any | to Loan Source | | | | | |
| 1. Full Name (Last, First, Middle Initial) | | Name of Employer | | | | |
| Mailing Address | | Occupation | | | | |
| | | Amount | | | | |
| City | ZIP Code | Guaranteed Outstanding: | | | | |
| 2. Full Name (Last, First, Middle Initial) | - | Name of Employer | | | | |
| Mailing Address | | Occupation | | | | |
| | T | Amount Guaranteed | | | | |
| City | ZIP Code | Outstanding: | | | | |
| 3. Full Name (Last, First, Middle Initial) | | Name of Employer | | | | |
| Mailing Address | | Occupation | | | | |
| | | Amount | | | | |
| City State | ZIP Code | Guaranteed Outstanding: | | | | |
| 4. Full Name (Last, First, Middle Initial) | ' | Name of Employer | | | | |
| Mailing Address | | Occupation | | | | |
| | | Amount | | | | |
| City | ZIP Code | Guaranteed Outstanding: | | | | |
| SUBTOTALS This Period This Page (optiona | N | | | | | |
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| TOTALS This Period (last page in this line of | nly) | ······································ | | | | |
| Carry outstanding balance only to LINE 3, S | Schedule D, for thi | s line. If no Schedule D, carry forward to appropriate line of Summary. | | | | |

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 25 OF FOR LINE NUMBER: **X** 13a (check only one)

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13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1ECAQG02L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) none ^D20^D ^M80^M Ž01Ž ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

| Gloria Bromell Tinu | | | | Let " | | |
|--------------------------------|---------------------------------------|------------------|--------------------------------|---|--|--|
| Tinubu, Gloria, B | Election: 2012 Primary General | | | | | |
| Mailing Address 8 Laurel St | | | | Other (specify) | | |
| City | | State | ZIP Code | ✗ Personal Funds of the Candidate | | |
| Conway | | SC | 29526-5154 | 1 croonary and or the canadate | | |
| Original Amount of Lo | oan | Cumulative Pa | yment To Date E | Balance Outstanding at Close of This Period | | |
| 7 | 10000.00 | 7 | 0.00 | 10000.00 | | |
| TERMS Date In | ncurred | С | ate Due Interest F | | | |
| M08M / D20D | / ž01ž ^Y | M M / D D | / Y ňoně Y | none % (apr) Yes No | | |
| List All Endorsers or | · · · · · · · · · · · · · · · · · · · | o Loan Source | | | | |
| 1. Full Name (Last, Fi | irst, Middle Initial) | | Name of Employer | | | |
| Mailing Address | | | Occupation | | | |
| City | State | ZIP Code | Amount Guaranteed Outstanding: | , , , , , , , , , | | |
| 2. Full Name (Last, Fir | rst, Middle Initial) | | Name of Employer | Name of Employer | | |
| Mailing Address | | | Occupation | | | |
| | 1- | T | Amount Guaranteed | | | |
| City | State | ZIP Code | Outstanding: | 9 9 | | |
| 3. Full Name (Last, Fir | rst, Middle Initial) | • | Name of Employer | | | |
| Mailing Address | | | Occupation | | | |
| | la | | Amount Guaranteed | | | |
| City | State | ZIP Code | Outstanding: | 7 7 | | |
| 4. Full Name (Last, Fir | rst, Middle Initial) | | Name of Employer | | | |
| Mailing Address | | | Occupation | | | |
| | 12 | T=-= | Amount | | | |
| City | State | ZIP Code | Guaranteed Outstanding: | 9 9 | | |
| | | • | r | | | |
| SUBTUTALS This Period | ınıs Page (optional) | | <u> </u> | 10000.00 | | |
| OTALS This Period (last | t page in this line only | y) | ····· | , | | |
| | ce only to LINE 3 Sch | adule D for this | line If no Schedule D. carry f | orward to appropriate line of Summary. | | |

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

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|--|--|--|--------------|--------------------------------------|------------------|---|
| AME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Co | ngres | S | | | Transac | ction ID : VNW1ECAQG86L |
| LOAN SOURCE Full Name (Last, Tinubu, Gloria, Bromell, , | LOAN SOURCE Full Name (Last, First, Middle Initial) Tinubu, Gloria, Bromell, , | | | | | Election: 2012 Primary General |
| Mailing Address 8 Laurel St | | | | | | Other (specify) ——————————————————————————————————— |
| City | | State | ZIP Cod | | | Personal Funds of the Candidate |
| Conway | | SC | 29526- | | | |
| Original Amount of Loan | .00 | Cumulative Pay | yment To | Date 0.00 | | ance Outstanding at Close of This Period 3000.00 |
| TERMS Date Incurred | | D | ate Due | | Interest Rate | e Secured: |
| M09M / D19D / Y Ž01Ž | Y | M M / D D | / Yno | ďue ďate ^v | | 00 |
| List All Endorsers or Guarantors | (if any) t | o Loan Source | | | | |
| 1. Full Name (Last, First, Middle I | nitial) | | | Name of Em | nployer | |
| Mailing Address | | | | Occupation | | |
| City | State | ZIP Code Amount Guaranteed Outstanding: | | | | 7 |
| 2. Full Name (Last, First, Middle In | l itial) | | | Name of Employer | | |
| Mailing Address | | | | Occupation | | |
| C:h | State | ZID Code | | Amount Guaranteed | | |
| City | State | ZIP Code | | Outstanding | • | ÿ y |
| 3. Full Name (Last, First, Middle In | itial) | | | Name of Em | nployer | |
| Mailing Address | | | | Occupation | | |
| City | State | ZIP Code | | Amount Guaranteed Outstanding: | | 7 |
| 4. Full Name (Last, First, Middle In | itial) | | | Name of Em | nployer | |
| Mailing Address | | | | Occupation | | |
| 20 | I | T= | | Amount Guaranteed | | |
| City | State | ZIP Code | | Outstanding: | | 9 |
| SUBTOTALS This Period This Page (| optional). | | | | ···· > | 3000.00 |
| TOTALS This Period (last page in this | line only | /) | | | > | , |
| Carry outstanding balance only to LII | NE 3, Sc | nedule D, for this | s line. If ı | no Schedule | D, carry forv | vard to appropriate line of Summary. |

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

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|--|---------------------|---|
| NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre | ess | Transaction ID : VNW1ECAQG36L |
| LOAN SOURCE Full Name (Last, First, I | Middle Initial) | Memo Item Election: 2012 |
| Tinubu, Gloria, Bromell, , | Primary | |
| Mailing Address 8 Laurel St | | X General Other (specify) ▼ |
| City | State | ZIP Code Personal Funds of the Candidate |
| Conway | SC | 29526-5154 Personal Funds of the Candidate |
| Original Amount of Loan | Cumulative Pa | yment To Date Balance Outstanding at Close of This Period |
| 5000.00 | , | 0.00 5000.00 |
| TERMS Date Incurred | [| Date Due Interest Rate Secured: (If none, enter 0) |
| M10M / D25D / Y Ž01Ž Y | M M / D D | y ňoně y 0.00 % (apr) Yes ₩ No |
| List All Endorsers or Guarantors (if any |) to Loan Source | |
| 1. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | <u> </u> | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount Guaranteed |
| City | ZIP Code | Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount Guaranteed |
| City | ZIP Code | Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
| | · | |
| SUBTOTALS This Period This Page (options | ıl) | 5000.00 |
| TOTALS This Period (last page in this line of | nly) | ······ |
| Carry outstanding balance only to LINE 3, | Schedule D, for thi | s line. If no Schedule D, carry forward to appropriate line of Summary. |

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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| | 13b |

| IAME OF COMMITTEE (Ir Gloria Bromell Tinu | ıbu for Congress | | ······· | action ID : VNW1ECAQGB9L | | |
|---|--|-------------------|------------------------------------|--|--|--|
| LOAN SOURCE Full Name (Last, First, Middle Initial) — Memo Item Tinubu, Gloria, Bromell, , | | | | Primary General | | |
| Mailing Address 8 Laurel St | | | | Other (specify) ▼ | | |
| City State ZIP | | | ZIP Code | Personal Funds of the Candidate | | |
| Conway | | SC | 29526-5154 | Fersonal Funds of the Candidate | | |
| Original Amount of Lo | pan | Cumulative Page | yment To Date Ba | alance Outstanding at Close of This Period | | |
| | 10000.00 | 7 | 0.00 | 10000.00 | | |
| TERMS Date In | curred | С | Pate Due Interest Ra | | | |
| M11M / D01D | ž01ž ^Y | M M / D D | | none % (apr) Yes No | | |
| List All Endorsers or | ` ', | o Loan Source | | | | |
| 1. Full Name (Last, Fi | rst, Middle Initial) | | Name of Employer | | | |
| Mailing Address | | | Occupation | Occupation | | |
| City | State | ZIP Code | Amount Guaranteed Outstanding: | 2 | | |
| 2. Full Name (Last, Fir | 2. Full Name (Last, First, Middle Initial) | | | Name of Employer | | |
| Mailing Address | | | Occupation | | | |
| 000 | | 710.0.1 | Amount Guaranteed | | | |
| City | State | ZIP Code | Outstanding: | 9 9 | | |
| 3. Full Name (Last, Fir | st, Middle Initial) | | Name of Employer | | | |
| Mailing Address | | | Occupation | | | |
| City | State | ZIP Code | Amount Guaranteed | | | |
| | | Zir Code | Outstanding: | 7 | | |
| 4. Full Name (Last, Fire | st, Middle Initial) | | Name of Employer | | | |
| Mailing Address | | | Occupation | Occupation | | |
| City | State | ZIP Code | Amount Guaranteed | | | |
| City | State | ZIP Code | Outstanding: | 9 9 | | |
| SUBTOTALS This Period | This Page (optional) | | | 10000.00 | | |
| | | | | 10000.00 | | |
| | | | | 9 9 | | |
| Carry outstanding balance | e only to LINE 3. Sch | edule D. for this | s line. If no Schedule D. carry fo | rward to appropriate line of Summary. | | |

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 30 OF FOR LINE NUMBER: **X** 13a (check only one)

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13b Transaction ID: VNW1ECAQG60L NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 15000.00 0.00 15000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) none ^D13^D M 11M Ž01Ž ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 15000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

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|--|-----------------------------|--|
| NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre | SS | Transaction ID : VNW1ECAQG10L |
| LOAN SOURCE Full Name (Last, First, N | Middle Initial) | Memo Item Election: 2012 |
| Tinubu, Gloria, Bromell, , | Memo Item Primary General | |
| Mailing Address 8 Laurel St | | Other (specify) |
| City | State | ZIP Code Responsible to the Candidate Personal Funds of the Candidate |
| Conway | SC | 29526-5154 |
| Original Amount of Loan | Cumulative Pa | yment To Date Balance Outstanding at Close of This Period |
| 2500.00 | , | 0.00 2500.00 |
| TERMS Date Incurred | [| Date Due Interest Rate Secured: (If none, enter 0) |
| M12M / D26D / Y Z01Z Y | M M / D D | / Yno due date none % (apr) Yes No |
| List All Endorsers or Guarantors (if any) | to Loan Source | |
| 1. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount Guaranteed |
| City | ZIP Code | Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | · | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | <u> </u> | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
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| SUBTOTALS This Period This Page (optional |) | 2500.00 |
| TOTALS This Period (last page in this line or | ıly) | ······································ |
| Carry outstanding balance only to LINE 3, S | chedule D, for thi | s line. If no Schedule D, carry forward to appropriate line of Summary. |

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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| NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre | SS | Transaction ID : VNW1ECAQG44L |
| LOAN SOURCE Full Name (Last, First, N | liddle Initial) | Memo Item Election: 2012 |
| Tinubu, Gloria, Bromell, , | | Primary |
| | | X General |
| Mailing Address 8 Laurel St | | Other (specify) ———————————————————————————————————— |
| City | State | ZIP Code Personal Funds of the Candidate |
| Conway | SC | 29526-5154 Tersonal Funds of the Candidate |
| Original Amount of Loan | Cumulative Pa | yment To Date Balance Outstanding at Close of This Period |
| 5000.00 | | 0.00 5000.00 |
| TERMS Date Incurred | Γ | Date Due Interest Rate Secured: (If none, enter 0) |
| M12 ^M / D26 ^D / Y Ž01Ž Y | M M / D D | / Yno due date none % (apr) Yes ✗ No |
| List All Endorsers or Guarantors (if any) | to Loan Source | |
| 1. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | ' | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
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| SUBTOTALS This Period This Page (optional |) | 5000.00 |
| TOTALS This Period (last page in this line or | nly) | ······································ |
| Carry outstanding balance only to LINE 3, S | chedule D, for thi | s line. If no Schedule D, carry forward to appropriate line of Summary. |

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

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|--|----------------------|---|--|--|
| NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congi | ess | Transaction ID : VNW1ECAQGA1L | | |
| LOAN SOURCE Full Name (Last, First, Middle Initial) Memo Item Election: 2012 | | | | |
| Tinubu, Gloria, Bromell, , | | Primary Reneral | | |
| Mailing Address 8 Laurel St | | Other (specify) ▼ | | |
| City | State | ZIP Code Personal Funds of the Candidate | | |
| Conway | SC | 29526-5154 Personal Funds of the Candidate | | |
| Original Amount of Loan | Cumulative Pa | yment To Date Balance Outstanding at Close of This Period | | |
| 1000.00 | | 0.00 | | |
| TERMS Date Incurred | Г | Date Due Interest Rate Secured: (If none, enter 0) | | |
| M12M / D31D / Y Ž01Ž Y | M M / D D | / Y ňoně Y none % (apr) Yes X No | | |
| List All Endorsers or Guarantors (if ar | ny) to Loan Source | | | |
| 1. Full Name (Last, First, Middle Initial) | | Name of Employer | | |
| Mailing Address | | Occupation | | |
| | | Amount | | |
| City | e ZIP Code | Guaranteed Outstanding: | | |
| 2. Full Name (Last, First, Middle Initial) | | Name of Employer | | |
| Mailing Address | | Occupation | | |
| | | Amount Guaranteed | | |
| City | e ZIP Code | Outstanding: | | |
| 3. Full Name (Last, First, Middle Initial) | | Name of Employer | | |
| Mailing Address | | Occupation | | |
| | | Amount | | |
| City | e ZIP Code | Guaranteed Outstanding: | | |
| 4. Full Name (Last, First, Middle Initial) | - | Name of Employer | | |
| Mailing Address | | Occupation | | |
| | | Amount | | |
| City | e ZIP Code | Guaranteed Outstanding: | | |
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| Carry outstanding balance only to LINE 3, | Schedule D, for this | s line. If no Schedule D, carry forward to appropriate line of Summary. | | |

Use separate schedule(s) for each category of the Detailed Summary Page

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Transaction ID: VNW1ECAQFY7L NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) none D03D M 06M ž013 ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

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OF

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| AME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Co | ongres | S | | | Transac | ction ID : VNW1ECAQG28L |
| LOAN SOURCE Full Name (Last, First, Middle Initial) Tinubu, Gloria, Bromell, , | | | | | Memo Item | Election: 2012 Primary General |
| Mailing Address 8 Laurel St | | | | | | Other (specify) ▼ |
| City State ZIP C | | | ZIP Cod | | | Personal Funds of the Candidate |
| Conway | | SC | 29526- | 5154 | | To restrict the second |
| Original Amount of Loan Cumulative Payment | | | | Date | Bala | ance Outstanding at Close of This Period |
| 500 | 0.00 | | | 0.00 | | 500.00 |
| TERMS Date Incurred | | D | Date Due | | Interest Rate (If none, enter | |
| M06M / D28D / Y Ž01Š | Y | M M / D D | / Yho | ďue ďate [∀] | 0. | % (apr) Yes No |
| List All Endorsers or Guarantors | (if any) t | o Loan Source | | | | |
| 1. Full Name (Last, First, Middle I | nitial) | | | Name of Em | nployer | |
| Mailing Address | | | | Occupation | | |
| City | State ZIP Code | | | Amount Guaranteed Outstanding: | | 9 |
| 2. Full Name (Last, First, Middle In | itial) | | | Name of Em | nployer | |
| Mailing Address | | | | Occupation | | |
| City | State | ZIP Code | | Amount Guaranteed Outstanding: | | 7 |
| 3. Full Name (Last, First, Middle Initial) | | | | Name of Employer | | |
| Mailing Address | | | | Occupation | | |
| City | City State ZIP Code | | | Amount Guaranteed Outstanding: | | 7 |
| 4. Full Name (Last, First, Middle Initial) | | | | Name of Em | nployer | |
| Mailing Address | | | | Occupation | | |
| City State ZIP Code | | Amount Guaranteed | | | | |
| | | | | Outstanding: | | 7 |
| SUBTOTALS This Period This Page (| optional). | | | | ····· > | 500.00 |
| FOTALS This Period (last page in this | line only | y) | | | ····• > | , , , , , , , , |
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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|---|----------------------------|--|--|--|
| NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre | ess | Transaction ID: VNW1ECAQG93L | | |
| LOAN SOURCE Full Name (Last, First, | Middle Initial) | Memo Item Election: 2012 | | |
| Tinubu, Gloria, Bromell, , | Memo Item Primary General | | | |
| Mailing Address 8 Laurel St | | Other (specify) | | |
| City | State | ZIP Code Responsible to the Candidate Personal Funds of the Candidate | | |
| Conway | SC | 29526-5154 Tersonal Funds of the Candidate | | |
| Original Amount of Loan | Cumulative Pa | yment To Date Balance Outstanding at Close of This Period | | |
| 200.00 | , | 0.00 200.00 | | |
| TERMS Date Incurred | [| Date Due Interest Rate Secured: (If none, enter 0) | | |
| M07M / D01D / Y Ž01Š Y | M M / D D | / Yno due date none | | |
| List All Endorsers or Guarantors (if any |) to Loan Source | | | |
| 1. Full Name (Last, First, Middle Initial) | | Name of Employer | | |
| Mailing Address | | Occupation | | |
| | | Amount | | |
| City | ZIP Code | Guaranteed Outstanding: | | |
| 2. Full Name (Last, First, Middle Initial) | <u>'</u> | Name of Employer | | |
| Mailing Address | | Occupation | | |
| | | Amount Guaranteed | | |
| City | ZIP Code | Outstanding: | | |
| 3. Full Name (Last, First, Middle Initial) | | Name of Employer | | |
| Mailing Address | | Occupation | | |
| | | Amount | | |
| City | ZIP Code | Guaranteed Outstanding: | | |
| 4. Full Name (Last, First, Middle Initial) | | Name of Employer | | |
| Mailing Address | | Occupation | | |
| | | Amount | | |
| City | ZIP Code | Guaranteed Outstanding: | | |
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| Carry outstanding balance only to LINE 3, | Schedule D, for thi | s line. If no Schedule D, carry forward to appropriate line of Summary. | | |

Use separate schedule(s) for each category of the Detailed Summary Page

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| AME OF COMMITTEE (In F Bloria Bromell Tinub | u for Congress | | | saction ID : VNW1ECAQGG9L |
|--|--------------------------------|------------------|---------------------------------|---|
| Tinubu, Gloria, Bro | • | Idle Initial) | ☐ Memo Ite | Election: 2012 Primary General |
| Mailing Address 8 Laurel St | | | | Other (specify) ▼ |
| City | State ZIP Cod | | ZIP Code | V Paranal Funda of the Condidate |
| Conway | | SC | 29526-5154 | Personal Funds of the Candidate |
| Original Amount of Loar | 1 | Cumulative Pa | ment To Date B | salance Outstanding at Close of This Period |
| , | 3500.00 | | 0.00 | 3500.00 |
| TERMS Date Incu | rred | Г | ate Due Interest R | |
| M07 ^M / D09 ^D / | ^Y Ž01Š ^Y | M M / D D | / Y ňoně Y | none % (apr) Yes No |
| List All Endorsers or G | uarantors (if any) to | o Loan Source | | |
| 1. Full Name (Last, Firs | t, Middle Initial) | | Name of Employer | |
| Mailing Address | | | Occupation | |
| 011 | 10 | 710 0 1 | Amount Guaranteed | |
| City | State | ZIP Code | Outstanding: | 9 9 |
| 2. Full Name (Last, First | , Middle Initial) | | Name of Employer | |
| Mailing Address | | | Occupation | |
| | lo | 710.0.1 | Amount Guaranteed | |
| City | State | ZIP Code | Outstanding: | 9 |
| 3. Full Name (Last, First | , Middle Initial) | | Name of Employer | |
| Mailing Address | | | Occupation | |
| | T | | Amount | |
| City | State | ZIP Code | Guaranteed Outstanding: | 9 9 |
| 4. Full Name (Last, First | , Middle Initial) | ! | Name of Employer | |
| Mailing Address | | | Occupation | |
| | | | Amount | |
| City | State | ZIP Code | Guaranteed Outstanding: | 7 7 7 |
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

| IAME OF COMMITTEE (II Gloria Bromell Tinu | ubu for Congress | | | action ID : VNW1ECAQGE3L |
|--|--|-------------------|------------------------------------|--|
| Tinubu, Gloria, B | | Idle Initial) | ☐ Memo Iter | m Election: 2012 Primary General |
| Mailing Address 8 Laurel St | | | | Other (specify) ▼ |
| City | | | ZIP Code | V Davestal Funds of the Condidate |
| Conway | | SC | 29526-5154 | Personal Funds of the Candidate |
| Original Amount of Lo | oan | Cumulative Page | ment To Date Ba | alance Outstanding at Close of This Period |
| , | 1500.00 | | 0.00 | 1500.00 |
| TERMS Date In | ncurred | С | ate Due Interest Ra | |
| M09M / D30D | / ¥ Ž013 Y | M M / D D | / Y ňoně Y | none % (apr) Yes No |
| List All Endorsers or | Guarantors (if any) to | o Loan Source | | |
| 1. Full Name (Last, F | irst, Middle Initial) | | Name of Employer | |
| Mailing Address | | | Occupation | |
| City | Ctata | ZID Code | Amount Guaranteed | |
| City | State ZIP Code Guaranteed Outstanding: | | | - Ap |
| 2. Full Name (Last, Fir | rst, Middle Initial) | | Name of Employer | |
| Mailing Address | | | Occupation | |
| City | Ctata | ZID Code | Amount Guaranteed | |
| City | State | ZIP Code | Outstanding: | 9 9 |
| 3. Full Name (Last, Fir | rst, Middle Initial) | | Name of Employer | |
| Mailing Address | | | Occupation | |
| | la | | Amount Guaranteed | |
| City | State | ZIP Code | Outstanding: | 7 |
| 4. Full Name (Last, Fir | rst, Middle Initial) | • | Name of Employer | |
| Mailing Address | | | Occupation | |
| | 1- | | Amount | |
| City | State | ZIP Code | Guaranteed Outstanding: | 9 |
| | ' | • | | |
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 39

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OF

| Gloria Bromell Tinul | | | Memo Item Election: 2012 | |
|--------------------------------|--------------------------------|------------------|---|------------------|
| Tinubu, Gloria, Br | romell, , | | Primary | |
| Mailing Address 8 Laurel St | | | General Other (specify) ▼ | |
| City | | | ZIP Code | |
| Conway | | | 29526-5154 Personal Funds of the C | Sandidate ——— |
| Original Amount of Loa | an | Cumulative Pa | ment To Date Balance Outstanding at Close of T | his Period |
| , | 700.00 | | 0.00 | 0.00 |
| TERMS Date Inc | curred | С | ate Due Interest Rate Secured | ı: |
| M11M / D15D / | ^Y Ž013 ^Y | M M / D D | / Y ňoně Y 0.00 % (apr) Yes | x No |
| List All Endorsers or 0 | Guarantors (if any) to | o Loan Source | | |
| 1. Full Name (Last, Fir | st, Middle Initial) | | Name of Employer | |
| Mailing Address | | | Occupation | |
| | | 1 | Amount Guaranteed | 7 |
| City | State | ZIP Code | Outstanding: | _ |
| 2. Full Name (Last, Firs | t, Middle Initial) | | Name of Employer | |
| Mailing Address | | | Occupation | |
| | I. | T | Amount Guaranteed | 7 |
| City | State | ZIP Code | Outstanding: | _ |
| 3. Full Name (Last, Firs | t, Middle Initial) | | Name of Employer | |
| Mailing Address | | | Occupation | |
| | | | Amount | |
| City | State | ZIP Code | Guaranteed Outstanding: | _ |
| 4. Full Name (Last, Firs | t, Middle Initial) | ' | Name of Employer | |
| Mailing Address | | | Occupation | |
| | | | Amount | |
| City | State | ZIP Code | Guaranteed Outstanding: | _ |
| NUDTOTAL O THE DOLLAR | T. D. / | | | |
| SUBTOTALS This Period | ınıs Page (optional) | | 700 | .00 |
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

| | | 100 |
|--|-------------------------|--|
| NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre | ss | Transaction ID : VNW1ECAQGH7L |
| LOAN SOURCE Full Name (Last, First, N | liddle Initial) | Memo Item Election: 2014 |
| Tinubu, Gloria, Bromell, , | induit illiniary | Memo Item Clection: 2014 |
| Mailing Address 8 Laurel St | Other (specify) | |
| City | State | ZIP Code Responsible to the Candidate Personal Funds of the Candidate |
| Conway | SC | 29526-5154 Tersonal Funds of the Candidate |
| Original Amount of Loan | Cumulative Pa | yment To Date Balance Outstanding at Close of This Period |
| 10000.00 | ļ, | 0.00 10000.00 |
| TERMS Date Incurred | Γ | Date Due Interest Rate Secured: (If none, enter 0) |
| M02M / D13D / Y Ž01Ă Y | M M / D D | / Y ňonr Y none % (apr) Yes X No |
| List All Endorsers or Guarantors (if any) | to Loan Source | |
| Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City State | Guaranteed Outstanding: | |
| 2. Full Name (Last, First, Middle Initial) | · | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount Guaranteed |
| City | ZIP Code | Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | 1 | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
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| Carry outstanding balance only to LINE 3, S | chedule D, for thi | s line. If no Schedule D, carry forward to appropriate line of Summary. |

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 41 OF FOR LINE NUMBER: (check only one)

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|--|---|---|--|--|
| NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre | ess | Transaction ID : VNW1ECAQGK2L | | |
| LOAN SOURCE Full Name (Last, First, I | Middle Initial) | Memo Item Election: 2014 | | |
| Tinubu, Gloria, Bromell, , | viidale iriitalij | Memo Item Clection: 2014 | | |
| Mailing Address 8 Laurel St | | Other (specify) ▼ | | |
| City | State | ZIP Code Personal Funds of the Candidate | | |
| Conway | SC | 29526-5154 | | |
| Original Amount of Loan | Cumulative Pa | yment To Date Balance Outstanding at Close of This Period | | |
| 1350.00 | | 0.00 1350.00 | | |
| TERMS Date Incurred | [| Oate Due Interest Rate Secured: (If none, enter 0) | | |
| M05M / D09D / Y Ž014 Y | M M / D D | / Y ňoně Y none % (apr) Yes X No | | |
| List All Endorsers or Guarantors (if any |) to Loan Source | | | |
| 1. Full Name (Last, First, Middle Initial) | | Name of Employer | | |
| Mailing Address | | Occupation | | |
| | | Amount | | |
| City | City State ZIP Code Guaranteed Outstanding: | | | |
| 2. Full Name (Last, First, Middle Initial) | · | Name of Employer | | |
| Mailing Address | | Occupation | | |
| | | Amount | | |
| City | ZIP Code | Guaranteed Outstanding: | | |
| 3. Full Name (Last, First, Middle Initial) | | Name of Employer | | |
| Mailing Address | | Occupation | | |
| | | Amount | | |
| City | ZIP Code | Guaranteed Outstanding: | | |
| 4. Full Name (Last, First, Middle Initial) | | Name of Employer | | |
| Mailing Address | | Occupation | | |
| | | Amount | | |
| City | ZIP Code | Guaranteed Outstanding: | | |
| | | | | |
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| Carry outstanding balance only to LINE 3, 5 | Schedule D, for thi | s line. If no Schedule D, carry forward to appropriate line of Summary. | | |

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER: (check only one)

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OF

| | | 130 |
|---|--------------------|---|
| NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congres | S | Transaction ID: VNW1ECB2ZK1L |
| LOAN SOURCE Full Name (Last, First, Mid | ddla Initial\ | |
| Tinubu, Gloria, Bromell, , | udie iriitiai) | Memo Item Election: 2014 Primary Concrel |
| Mailing Address 8 Laurel St | | ✓ General Other (specify) ▼ |
| City | State | ZIP Code ** Personal Funds of the Candidate |
| Conway | SC | 29526-5154 Telsonal Funds of the Candidate |
| Original Amount of Loan | Cumulative Pay | ment To Date Balance Outstanding at Close of This Period |
| 1500.00 | | 0.00 1500.00 |
| TERMS Date Incurred | С | ate Due Interest Rate Secured: (If none, enter 0) |
| M07 ^M / D15 ^D / Y Ž014 Y | M M / D D | / Y ňoně Y 0.00 % (apr) Yes X No |
| List All Endorsers or Guarantors (if any) t | o Loan Source | |
| Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City State | ZIP Code | Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City | ZIP Code | Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | | Amount |
| City State | ZIP Code | Guaranteed Outstanding: |
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| Carry outstanding balance only to LINE 3, Sci | hedule D, for this | line. If no Schedule D, carry forward to appropriate line of Summary. |

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER: (check only one)

X 13a 13b

OF

| AME OF COMMITTEE (II Gloria Bromell Tinu | ubu for Congress | | Halisa | action ID : VNW1ECB2ZN7L | | |
|---|--------------------------|-------------------|----------------------------------|--|--|--|
| LOAN SOURCE Full Tinubu, Gloria, E | | Idle Initial) | ☐ Memo Iter | Primary General | | |
| Mailing Address 8 Laurel St | | | | Other (specify) ▼ | | |
| City | , | | ZIP Code | Personal Funds of the Candidate | | |
| Conway | | SC | 29526-5154 | reisonal runus of the Candidate | | |
| Original Amount of Lo | oan | Cumulative Pa | yment To Date Ba | alance Outstanding at Close of This Period | | |
| ļ.,, | 1800.00 | 2 | 0.00 | 1800.00 | | |
| TERMS Date In | ncurred | С | ate Due Interest Ra | | | |
| M07M / D23D | / ¥ 2014 Y | M M / D D | | 0.00 % (apr) Yes No | | |
| List All Endorsers or | ` ' | o Loan Source | | | | |
| 1. Full Name (Last, F | irst, Middle Initial) | | Name of Employer | | | |
| Mailing Address | | | Occupation | | | |
| City | State | ZIP Code | Amount Guaranteed Outstanding: | | | |
| 2. Full Name (Last, Fir | rst, Middle Initial) | | Name of Employer | Name of Employer | | |
| Mailing Address | | | Occupation | | | |
| 000 | lo | 710.0.1 | Amount Guaranteed | | | |
| City | State | ZIP Code | Outstanding: | 9 | | |
| 3. Full Name (Last, Fir | rst, Middle Initial) | | Name of Employer | | | |
| Mailing Address | | | Occupation | | | |
| City | State | ZIP Code | Amount Guaranteed | | | |
| | | Zir Code | Outstanding: | 9 9 | | |
| 4. Full Name (Last, Fi | rst, Middle Initial) | | Name of Employer | | | |
| Mailing Address | | | Occupation | | | |
| City | State | ZIP Code | Amount Guaranteed | | | |
| Oity | State | Zir Code | Outstanding: | 9 9 | | |
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| Ones autotoralia a balan | es embrets LINE O. Coll | adula D. faratti | line If we Caberlist D | musual to annuanciate live of Community | | |
| Carry outstanding baland | ce only to LINE 3. Sch | edule D. for this | line. If no Schedule D. carry fo | rward to appropriate line of Summary. | | |

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 44 OF FOR LINE NUMBER: **x** 13a (check only one)

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13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1ECRDBQ2L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D 15D ^M80^M ž014 ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 3000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

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|---|---|--|--|--|
| NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre | ess | Transaction ID : VNW1ECZ6ZM2L | | |
| LOAN SOURCE Full Name (Last, First, | Middle Initial) | Memo Item Election: 2014 | | |
| Tinubu, Gloria, Bromell, , | Wilder Hillary | Memo Item Primary General | | |
| Mailing Address 8 Laurel St | Other (specify) | | | |
| City | State | ZIP Code Responsible to the Candidate Personal Funds of the Candidate | | |
| Conway | SC | 29526-5154 Tersonal Funds of the Candidate | | |
| Original Amount of Loan | Cumulative Pa | yment To Date Balance Outstanding at Close of This Period | | |
| 6500.00 | | 4000.00 2500.00 | | |
| TERMS Date Incurred | | Date Due Interest Rate Secured: (If none, enter 0) | | |
| M09M / D21D / Y Ž014 Y | M M / D D | / Y ňoně Y 0.00 % (apr) Yes X No | | |
| List All Endorsers or Guarantors (if an | y) to Loan Source | | | |
| 1. Full Name (Last, First, Middle Initial) | | Name of Employer | | |
| Mailing Address | | Occupation | | |
| | | Amount | | |
| City | City State ZIP Code Guaranteed Outstanding: | | | |
| 2. Full Name (Last, First, Middle Initial) | ' | Name of Employer | | |
| Mailing Address | | Occupation | | |
| | | Amount | | |
| City | ZIP Code | Guaranteed Outstanding: | | |
| 3. Full Name (Last, First, Middle Initial) | · | Name of Employer | | |
| Mailing Address | | Occupation | | |
| | | Amount | | |
| City | ZIP Code | Guaranteed Outstanding: | | |
| 4. Full Name (Last, First, Middle Initial) | • | Name of Employer | | |
| Mailing Address | | Occupation | | |
| | | Amount | | |
| City | ZIP Code | Guaranteed Outstanding: | | |
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Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER:
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| AME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Co | ongres | S | | | Transac | ction ID : VNW1ED3WER9L |
| LOAN SOURCE Full Name (Last, Tinubu, Gloria, Bromell, , | First, Mid | ddle Initial) | | | Memo Item | Election: 2012 Primary General |
| Mailing Address 8 Laurel St | | | | | | Other (specify) ——————————————————————————————————— |
| City | | State | ZIP Cod | | | Personal Funds of the Candidate |
| Conway | | SC | 29526- | 5154 | | 1 dischar 1 and 51 the Sandidate |
| Original Amount of Loan | | Cumulative Pay | yment To | Date | Bala | ance Outstanding at Close of This Period |
| 500 | .00 | 9 | | 0.00 | | 500.00 |
| TERMS Date Incurred | | D | ate Due | | Interest Rate (If none, enter | |
| M09M / D21D / Y Z014 | Υ | M M / D D | / Y | ňone Y | 0. | 00 % (apr) Yes X No |
| List All Endorsers or Guarantors | (if any) t | o Loan Source | | | | |
| 1. Full Name (Last, First, Middle I | nitial) | | | Name of Em | ployer | |
| Mailing Address | | | | Occupation | | |
| City | State | ZIP Code Amount Guarantee Outstandir | | | | 7 |
| 2. Full Name (Last, First, Middle In | itial) | | | Name of Employer | | |
| Mailing Address | | | | Occupation | | |
| City | State | ZIP Code | | Amount Guaranteed Outstanding: | | 9 9 |
| 3. Full Name (Last, First, Middle In | itial) | | | Name of Em | ployer | |
| Mailing Address | | | | Occupation | | |
| City | State | ZIP Code | | Amount Guaranteed Outstanding: | | 7 |
| 4. Full Name (Last, First, Middle In | itial) | | | Name of Employer | | |
| Mailing Address | | | | Occupation | | |
| City | State | ZIP Code | | Amount Guaranteed Outstanding: | | 7 |
| SUBTOTALS This Period This Page (c | | | | | ···· · | 500.00 |
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Use separate schedule(s) for each category of the Detailed Summary Page

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OF

NAME OF COMMITTEE (In Full) Transaction ID: VNW1ED5M069L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 10^M none ^D16^D ž014 ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER: (check only one)

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|---|--------------------|--------------------------------------|--|
| NAME OF COMMITTEE (In Full) | | Trans | action ID: VNW1ED85ZM5L |
| Gloria Bromell Tinubu for Congres | | | |
| LOAN SOURCE Full Name (Last, First, M | iddle Initial) | ☐ Memo Iter | |
| Tinubu, Gloria, Bromell, , | | | Primary |
| Mailing Address | | | General Other (specify) ▼ |
| 8 Laurel St | | | Other (specify) |
| City | State | ZIP Code | ✗ Personal Funds of the Candidate |
| Conway | SC | 29526-5154 | |
| Original Amount of Loan | Cumulative Page | yment To Date Ba | alance Outstanding at Close of This Period |
| 6000.00 | | 0.00 | 6000.00 |
| TERMS Date Incurred | С | late Due Interest Ra (If none, en | |
| M10 ^M / D29 ^D / Y Z014 Y | M M / D D | / Y ňoně Y | none % (apr) Yes X No |
| List All Endorsers or Guarantors (if any) | to Loan Source | | |
| 1. Full Name (Last, First, Middle Initial) | | Name of Employer | |
| Mailing Address | | Occupation | |
| | | Amount | |
| City State | ZIP Code | Guaranteed Outstanding: | 7 |
| 2. Full Name (Last, First, Middle Initial) | • | Name of Employer | |
| Mailing Address | | Occupation | |
| | | Amount | |
| City | ZIP Code | Guaranteed Outstanding: | 9 |
| 3. Full Name (Last, First, Middle Initial) | | Name of Employer | |
| Mailing Address | | Occupation | |
| | | Amount | |
| City | ZIP Code | Guaranteed Outstanding: | 7 |
| 4. Full Name (Last, First, Middle Initial) | | Name of Employer | |
| Mailing Address | | Occupation | |
| | | Amount | |
| City State | ZIP Code | Guaranteed Outstanding: | , , , , , , , , |
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| Carry outstanding balance only to LINE 3. So | shedule D for this | s line If no Schedule D. carry fo | rward to appropriate line of Summary |

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER:
(check only one)

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13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1ED9S8Q8L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1100.00 0.00 1100.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 11M 0.00 D04D ž014 ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1100.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

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| | | | Detailed Guiriniary | i age | | 13b |
|---|--------------------|---------------|-------------------------|------------|---------------------------|------------|
| NAME OF COMMITTEE (In Full) | | | Trai | nsaction I | D : VNW1EDAEJQ4L | |
| Gloria Bromell Tinubu for Congres | SS | | | | | |
| LOAN SOURCE Full Name (Last, First, M | iddle Initial) | | ☐ Memo I | tem Elec | ction: 2012 | |
| Tinubu, Gloria, Bromell, , | | | | | Primary | |
| | | | | x | General | |
| Mailing Address 8 Laurel St | | | | | Other (specify) ▼ | |
| City | State | ZIP Code |) | x | Personal Funds of the | Condidata |
| Conway | SC | 29526-5 | 154 | | Personal Funds of the | Januluale |
| Original Amount of Loan | Cumulative Pa | yment To D | ate | Balance C | Outstanding at Close of T | his Period |
| 900.00 | | | 0.00 | L | 900 | 0.00 |
| | 7 | 7 | | | 1 | |
| TERMS Date Incurred | L | Date Due | Interest (If none, | | Secured | 1: |
| M11M / D04D / Y Ž01Ž Y | M M / D D | / Y 1 | íone ^Y | none | % (apr) | x No |
| List All Endorsers or Guarantors (if any) | to Loan Source | | | | | |
| 1. Full Name (Last, First, Middle Initial) | | | Name of Employer | | | |
| Mailing Address | | (| Occupation | | | |
| | | | Amount | | | |
| City State | ZIP Code | | Guaranteed | | | 7 |
| City | 211 0000 | | Outstanding: | 7 | 9 | _ |
| 2. Full Name (Last, First, Middle Initial) | • | | Name of Employer | | | |
| Mailing Address | | | Occupation | | | |
| | | | Amount | | | |
| City | ZIP Code | | Guaranteed Outstanding: | 7 | 7 | |
| 3. Full Name (Last, First, Middle Initial) | | | Name of Employer | | | |
| Mailing Address | | (| Occupation | | | |
| | | | Amount | | | |
| City State | ZIP Code | | Guaranteed Outstanding: | | 7 | |
| 4. Full Name (Last, First, Middle Initial) | | | Name of Employer | | | |
| Mailing Address | | | Occupation | | | |
| | | | Amount | | | |
| City State | ZIP Code | | Guaranteed | | | |
| | | | Outstanding: | , , | , , , , , , | |
| | | | | | | |
| SUBTOTALS This Period This Page (optional) | | | ······ | L | 900 | 0.00 |
| TOTALS This Period (last page in this line on | ly) | | | | , , , | |
| Carry outstanding balance only to LINE 3, So | hedule D for this | s line If no | Schedule D. carry | forward t | to appropriate line of Si | ımmarv |
| Carry outstanding balance only to LINE 3. So | nedule D, for this | s line. If no | Schedule D, carry | torward t | to appropriate line of St | ımmarv. |

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 51 OF FOR LINE NUMBER: **x** 13a (check only one)

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13b Transaction ID: VNW1EDAEJT7L NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1200.00 0.00 1200.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 11M none ^D14^D ž014 ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1200.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 52 OF
FOR LINE NUMBER:
(check only one)

13a

| | | 130 |
|--|------------------------------------|---|
| NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre | ess | Transaction ID : VNW1EDKFXC7L |
| LOAN SOURCE Full Name (Last, First, Tinubu, Gloria, Bromell, , | ☐ Memo Item | |
| Mailing Address 8 Laurel St | X General Other (specify) ▼ | |
| City | State | ZIP Code Personal Funds of the Candidate |
| Conway | SC | 29526-5154 |
| Original Amount of Loan 501.33 | Cumulative Pa | yment To Date Balance Outstanding at Close of This Period 0.00 501.33 |
| TERMS Date Incurred | - | Date Due Interest Rate Secured: |
| | | (If none, enter 0) |
| M12M / P30D / Y 2014 Y | M = M / D = D | none % (apr) Yes X No |
| List All Endorsers or Guarantors (if any |) to Loan Source | Name of Employer |
| 1. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| City | ZIP Code | Amount Guaranteed |
| Oity | Zii Gode | Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | 710.0 | Amount Guaranteed |
| City | ZIP Code | Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | · | Name of Employer |
| Mailing Address | | Occupation |
| City | ZID Code | Amount Guaranteed |
| City | ZIP Code | Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | | Name of Employer |
| Mailing Address | | Occupation |
| | 710.0 | Amount Guaranteed |
| City | ZIP Code | Outstanding: |
| SUBTOTALS This Period This Page (option | - I | |
| | | , , , , |
| TOTALS This Period (last page in this line of | only) | ······································ |
| Carry outstanding balance only to LINE 3, | Schedule D, for thi | s line. If no Schedule D, carry forward to appropriate line of Summary. |

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 53 OF FOR LINE NUMBER: **x** 13a (check only one)

54

13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1EE17QP0L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 600.00 0.00 600.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D13^D M 07M Ž015 ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 600.00 TOTALS This Period (last page in this line only) 363351.33 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 54 OF
FOR LINE NUMBER:
(check only one)

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|---|----|
| x | 10 |

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

| Ciona Diomeir Tinub | u ioi v | Juligiess | | | |
|---|-----------------------------|-------------------------------|---|--|--|
| A. Full Name (Last, First, Middle Initial) of [| Nature of Debt (Purpose): | | | | |
| Lake Research Partners Inc | polling and survey services | | | | |
| | | | | | |
| Mailing Address 1726 M St NW | | | | | |
| Ste 1100 | State | Zip Code | | | |
| Washington | DC | 20036-4528 | | | |
| | | 20000 4020 | | | |
| Outstanding Balance Beginning This Period | od | | Transaction ID: VNS3P9H64F1 | | |
| 6500.00 | | | | | |
| Amount Incurred This Period | | Payment This Period | Outstanding Balance at Close of This Period | | |
| | 1 | | _ | | |
| 0.00 | | 0.00 | 6500.00 | | |
| | | | | | |
| B. Full Name (Last, First, Middle Initial) of D | ebtor or Cre | ditor | Nature of Debt (Purpose): | | |
| Poplus, Reginald, , , | | | Consulting Services - management | | |
| Mailing Address 2475 Fnon Rd SW | | | | | |
| Mailing Address 2475 Enon Rd SW | | | | | |
| City | State | Zip Code | | | |
| Atlanta | GA | 30331-7843 | | | |
| Outstanding Palance Reginning This Perio | | | | | |
| Outstanding Balance Beginning This Period | Ju | | Transaction ID: VNS3P9H64P7 | | |
| 4191.66 | | | | | |
| Amount Incurred This Period | | Payment This Period | Outstanding Balance at Close of This Period | | |
| | 1 | | | | |
| 0.00 | | 0.00 | 4191.66 | | |
| | | | | | |
| C. Full Name (Last, First, Middle Initial) of I | Nature of Debt (Purpose): | | | | |
| Smith, James, E., , Jr., Esq. | | | legal services | | |
| Mailing Address 1718 Hollywood Dr | | | | | |
| Mailing Address 1718 Hollywood Dr | | | | | |
| City | State | Zip Code | | | |
| Columbia | SC | 29205-3216 | | | |
| Outstanding Balance Beginning This Perio | nd | | Transaction ID: VNS3P9H6589 | | |
| | Ť | | Transaction is 1 viteor of 10000 | | |
| 600.00 | | | | | |
| Amount Incurred This Period | | Payment This Period | Outstanding Balance at Close of This Period | | |
| 0.00 | 1 | 0.00 | 600.00 | | |
| 0.00 | | 0.00 | 000.00 | | |
| | | | | | |
| 1) SUBTOTALS This Period This Page (option | ıal) | | 11291.66 | | |
| , | 7 | | | | |
| 2) TOTALS This Period (last page this line nu | 11291.66 | | | | |
| | | | | | |
| 3) TOTAL OUTSTANDING LOANS from Sche | ▶ 363351.33 | | | | |
| | | | | | |
| 4) ADD 2) and 3) and carry forward to approp | priate line of | Summary Page (last page only) | ▶ 374642.99 | | |
| | | | 7 | | |